

OCT 12 2004

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USPTO  
TRADEMARK

**Certificate of Mailing under 37 CFR 1.8**

I hereby certify that this correspondence is being deposited with the United States Postal Service on the date shown below with sufficient postage as first class mail in an envelope addressed to the Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

Date: October 6, 2004

Michael Navarro

Michael Navarro

*Fee Sheet*  
JRW

Docket No. ESD1.PAU.02

**Patent**

**IN THE UNITED STATES PATENT AND TRADEMARK OFFICE**

Applicant: Rodov et al.

Examiner: Mai Huong C. Tran

Serial No.: 10/635,390

Art Unit: 2818

Filed: August 6, 2003

Title: Method and Apparatus for Preventing Microcircuit Dynamic Thermo-Mechanical Damage During an ESD Event

**RESPONSE TO OFFICE ACTION**

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Dear Sir:

This amendment is being filed in response to the Office Action dated July 9, 2004. Although no extension of time is necessary, if any extension or fee may be required for consideration of this amendment, such is hereby requested. A check in the amount \$764.00 is enclosed for the added claims. If any further fee is necessary please charge any deficit or credit any surplus to Deposit Account No. 01-1960.

10/13/2004 ZJUHAR1 00000042 011960 10635390

01 FC:2201 220.00 0P  
02 FC:2202 5.00 DA 544.00 0P

10/22/2004 ADAVID 00000001 011960 10635390

01 FC:2201 88.00 DA  
02 FC:2203 150.00 DA

PATENT APPLICATION FEE DETERMINATION RECORD  
Effective October 1, 2003

Application or Docket Number

10/635,390

CLAIMS AS FILED - PART I

(Column 1) (Column 2)

TOTAL CLAIMS			
FOR		NUMBER FILED	NUMBER EXTRA
TOTAL CHARGEABLE CLAIMS		minus 20 =	
INDEPENDENT CLAIMS		minus 3 =	
MULTIPLE DEPENDENT CLAIM PRESENT			<input type="checkbox"/>

\* If the difference in column 1 is less than zero, enter "0" in column 2

CLAIMS AS AMENDED - PART II

(Column 1) (Column 2) (Column 3)

AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Minus	=		
Total	• 69	Minus	• 35	= 34	
Independent	• 11	Minus	• 4	= 3	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

SMALL ENTITY  
TYPE  OR OTHER THAN  
SMALL ENTITY

RATE	FEES	RATE	FEES
BASIC FEE	385.00	OR BASIC FEE	770.00
XS 9=		OR XS16=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL		OR TOTAL	

SMALL ENTITY  
OTHER THAN  
SMALL ENTITY

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 9=	30.6	OR XS18=	
X43=	30.00	OR X86=	
+145=	150.00	OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Minus	=		
Total	•	Minus	•	=	
Independent	•	Minus	•••	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
XS 9=		OR XS18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

(Column 1) (Column 2) (Column 3)

AMENDMENT C		CLAIMS REMAINING AFTER AMENDMENT		HIGHEST NUMBER PREVIOUSLY PAID FOR	PRESENT EXTRA
		Minus	=		
Total	•	Minus	•	=	
Independent	•	Minus	•••	=	
FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM <input type="checkbox"/>					

RATE	ADDI- TIONAL FEE	RATE	ADDI- TIONAL FEE
X\$ 9=		OR X\$18=	
X43=		OR X86=	
+145=		OR +290=	
TOTAL ADDIT. FEE		OR TOTAL ADDIT. FEE	

- If the entry in column 1 is less than the entry in column 2, write "0" in column 3.
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20".
- If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3".
- The "Highest Number Previously Paid For" (Total or Independent) is the highest number found in the appropriate box in column 1.